IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF SOUTH CAROLINA

| Vickie L Vickers | Cor |
|---|------------|
| (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) | Case (to l |
| -against- Medical Uniterity of South Cardin | 14 |

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Complaint for a Civil Case

2021 JUN -8 PH 3: 52

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

| Name | Vickia L Vickers |
|--------------------|-------------------|
| Street Address | 529 Schooner Road |
| City and County | Charleston |
| State and Zip Code | SC 29412 |
| Telephone Number | 443 - 743 - 4581 |

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

| Defendant No. 1 | ^ · |
|-------------------------|------------------|
| Name | Vennis Pankus |
| Job or Title (if known) | SuperVisor |
| Street Address | 171 9shley ave |
| City and County | CILY Charleston |
| State and Zip Code | 29425 |
| Telephone Number | 943-792-1414 |
| Defendant No. 2 | |
| Name | Charlies Bennett |
| Job or Title | Supervisor |
| (if known) | |
| Street Address | 17/ ashley ave |
| City and County | CHY Charleston |
| State and Zip Code | 50, 29425 |
| Telephone Number | 443-792-1414 |
| Defendant No. 3 | |
| Name | |

| | | Job or Title (if known) | |
|-----|--------------------------------|---|--|
| | | Street Address | |
| | | City and County | |
| | | State and Zip Code | |
| | | Telephone Number | |
| | | Defendant No. 4 | |
| | | Name | |
| | | Job or Title | |
| | | (if known) | |
| | | Street Address | |
| | | City and County | |
| | | State and Zip Code | |
| | | Telephone Number | |
| II. | Basi | s for Jurisdiction | |
| | unde Unde State case. | r the United States Constitution er 28 U.S.C. § 1332, a case in who or nation and the amount at stall | the parties. Under 28 U.S.C. § 1331, a case arising or federal laws or treaties is a federal question case. hich a citizen of one State sues a citizen of another ke is more than \$75,000 is a diversity of citizenship se, no defendant may be a citizen of the same State |
| | What | t is the basis for fodoral court in | signification? (strate all all a series) |
| | WIIdi | | risdiction? (check all that apply) |
| | | ☐ Federal question | ☐ Diversity of citizenship |
| | Fill o | ut the paragraphs in this section | that apply to this case. |
| | A. | If the Basis for Jurisdiction | Is a Federal Question |
| | | List the specific federal statut States Constitution that are at | es, federal treaties, and/or provisions of the United issue in this case. |
| | | Soul all lleve | sed dischilitiant |
| | | and Bulling | ind Stocklin me |
| | | | 8 |

B. If the Basis for Jurisdiction Is Diversity of Citizenship

| 1. | ine Plaintiπ(s) | | |
|----|-----------------|---|----------------------|
| | a. | If the plaintiff is an individual | |
| | | The plaintiff, (name) | , is a citizen of |
| | | the State of (name) | <u> </u> |
| | b. | If the plaintiff is a corporation | |
| | | The plaintiff, (name) | |
| | | under the laws of the State of (name) | |
| | | and has its principal place of business in the St | tate of (name) |
| | | · | |
| | (If m | ore than one plaintiff is named in the complaint, a | attach an additional |
| | | providing the same information for each addition | |
| 2 | The | Defendant(a) | |
| 2. | Ine | Defendant(s) | |
| | a. | If the defendant is an individual | |
| | | The defendant, (name) | , is a citizen of |
| | | the State of (name) | Or is a citizen of |
| | | (foreign nation) | |
| | b. | If the defendant is a corporation | |
| | | The defendant, (name) | , is |
| | | incorporated under the laws of the State of (na | |
| | | , and has its princ | |
| | | business in the State of (name) | . <i>Or</i> is |
| | | incorporated under the laws of (foreign nation | |
| | | , and has its princ | cipal place of |
| | | business in (name) | · |
| | | | |
| | | nore than one defendant is named in the complain | |
| | addi | itional page providing the same information for e | ach additional |
| | defe | endant.) | |

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because (explain):

22 million dollars

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

Follow me in to Shawn Jenhins hop.

I gue the dady at the desk the Base, I put Both of my hand on the desh and pennis Pankus Stated to Rubbed upand Down on my fely hand very Fart and it hunt.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

| <u> </u> | million | 0.000.0 | |
|----------|---------|---------|------|
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V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where caserelated papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

| | Date of signing: | _, 20 |
|----|--|------------------|
| | Signature of Plaintiff Printed Name of Plaintiff | Victie L Victers |
| | | |
| В. | For Attorneys | |
| | Date of signing: | |
| | Signature of Attorney | |
| | Printed Name of Attorney | |
| | Bar Number | |
| | Name of Law Firm | |
| | Address | |
| | Telephone Number | |
| | E-mail Address | |